

J. P. Scott LEETUNG

BOOK #1 , Tab D

9/15/89

(GREETINGS TO HOSTS, GUESTS, FRIENDS, ETC.)

I AM TRULY HONORED TO ~~BE THE FIRST~~ DELIVER A LECTURE
 ESTABLISHED TO HONOR ONE OF THE GREAT ~~PERSONS~~ *PEDIATRICIANS OF THIS CITY*
 AND THIS ~~HOSPITAL~~ *HOSPITAL* THAT HONOR IS ENHANCED BECAUSE
 JPS WAS MY FRIEND.

WORKING WITH JPS WHEN
 I HAD THE PRIVILEGE OF ~~SERVING UNDER HIS GUIDANCE~~
~~WITH DR. STROUS IN 1946~~ PEDIATRIC SURGERY WAS A NEW IDEA AND NOT
 YET A SPECIALTY AT THAT TIME. *JPS*
~~DR. STROUS~~ WAS A KEY INFLUENCE IN THE
~~DEVELOPMENT OF THIS NEW SPECIALTY~~ *IN THIS HOSPITAL.*
 DEVELOPMENT OF THIS NEW SPECIALTY *M.* AND I CAN TELL YOU FROM
~~I WAS~~
 FIRST-HAND EXPERIENCE THAT ~~IT WAS~~ NOT PARTICULARLY APPRECIATED BY
~~THE MEDICAL STAFF AT THAT TIME.~~

MANY FUTURE FRIENDS AND SUPPORTERS WHEN I
FIRST CAME. JPS WAS NOT AMONG THEM

JPS

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BUT, THANKS TO [REDACTED] AND A HANDFUL OF PEOPLE LIKE HIM, WE
BEGAN THIS NEW SPECIALTY OF PEDIATRIC SURGERY WITH THE CONCEPTS OF
QUALITY MEDICINE AND COMPASSIONATE PATIENT CARE BUILT RIGHT IN.

NEVER ONCE HAVE I EVER REGRETTED HAVING CHOSEN THIS PARTICULAR
ROAD IN MEDICINE. A [REDACTED]

[REDACTED] JPS
[REDACTED] NEVER REGRETTED
~~OTHER~~ HAVING SUPPORTED ME, EARLY ON, I DO
BELIEVE

IF I SOUND A LITTLE ON THE MUSHY, SENTIMENTAL SIDE, I GUESS
IT'S BECAUSE I FEEL MUSHY AND SENTIMENTAL. [REDACTED]

I ^{AM} ^{TERMINAL} [REDACTED] ON LEAVE. [REDACTED]

[REDACTED] FOR ME.

THEN, ON OCTOBER 1 I WILL SAY "FAREWELL" TO ONE OF THE MOST
EXCITING PERIODS OF MY LIFE.

OVER THE NEXT SEVERAL MONTHS I WANT TO CLEAN OUT A FEW FILES,
TIE UP SOME LOOSE ENDS, AND PUT SOME THOUGHTS DOWN ON PAPER
REGARDING MY FORMER INCARNATION AS A PEDIATRIC SURGEON AND MY MORE
RECENT EXPERIENCES OF THESE PAST 8 YEARS AS YOUR SURGEON GENERAL.

AND, WITH YOUR INDULGENCE, I'D LIKE TO EXPLOIT THIS PARTICULAR OPPORTUNITY TO DO A LITTLE REMINISCING AND THINK OUT LOUD ABOUT MY LIFE AS THE NATION'S S.G.

FIRST, LET ME SAY I REMAIN TOTALLY GRATEFUL TO PRESIDENT REAGAN FOR HAVING NOMINATED ME IN 1981 AND FOR RE-NOMINATING ME IN 1985.

IN 1981 I WASN'T A VERY POPULAR CHOICE. I HAD A REPUTATION AS AN OUTSPOKEN PERSON WITH VERY STRONG OPINIONS ON IMPORTANT ISSUES. AND THOSE OPINIONS -- AND MY AGE, WHICH WAS 65 WAY BACK THEN -- WERE RAISED AS ARGUMENTS AGAINST MY BEING THE COUNTRY'S SURGEON GENERAL.

THE DEBATE WENT ON FOR ABOUT 10 MONTHS, DURING WHICH TIME I DID A LOT OF THINKING ABOUT THE CHALLENGE I HAD BEEN OFFERED.

FRANKLY, I WONDERED IF I COULD -- OR EVEN IF I SHOULD -- BECOME A WHOLE NEW PERSON IN ORDER TO GAIN THE APPROVAL OF THE UNITED STATES SENATE. I DECIDED I COULDN'T AND I SHOULDN'T. THE PRESIDENT HAD INVITED ME TO WASHINGTON FOR THE PERSON I HAD BEEN SO FAR ... NOT FOR SOME PERSON I MIGHT BECOME.

I ALSO DECIDED THAT MY RELIGIOUS BELIEFS WERE NOT NEGOTIABLE COMMODITIES AND, THEREFORE, I WOULD NOT DEPOSIT THEM IN A BLIND TRUST AND LEAVE THEM THERE FOR THE DURATION OF MY GOVERNMENT SERVICE.

MY PERSONAL MORAL CODE WAS MINE AND I WOULD KEEP IT. I DECIDED THAT I WOULD NOT DONATE MY CODE TO SOME WORTHY CHARITY PRIOR TO BEING SWORN IN AS SURGEON GENERAL.

I HAD SOME ETHICAL PRINCIPLES, ALSO. AND I HAD ADVERTISED THEM FAIRLY WIDELY. AND I DECIDED NOT TO LEAVE THEM IN A TRUNK IN PHILADELPHIA, WHILE I SERVED MY COUNTRY IN WASHINGTON, D.C.

I DON'T REPORT ALL THIS WITH ANY SMUGNESS, BY THE WAY. I CAME TO THESE DECISIONS AFTER MUCH DELIBERATION ABOUT THE NATURE OF GOVERNMENT SERVICE ... WHAT IT MIGHT DO FOR ME ... AND WHAT I MIGHT DO FOR IT. I REALLY WANTED TO LEAVE MANY TIMES IN 1981. IT WAS BETTY WHO CONTINUED TO REMIND ME I HAD NO JOB IN PHILADELPHIA.

I CAME TO BELIEVE THEN -- AND I CERTAINLY BELIEVE NOW -- THAT AN INDIVIDUAL'S BEST APPROACH TO PUBLIC SERVICE IS TO PROMISE TO GIVE IT EVERYTHING YOU HAVE ... OF WHATEVER IT IS YOU DO HAVE.

YOU MUST BE WILLING AND EVEN EAGER TO DRAW HEAVILY FROM YOUR OWN STOREHOUSE OF KNOWLEDGE AND LIFE EXPERIENCE ... FROM THE IDEAS AND SENTIMENTS YOU'VE ABSORBED FROM YOUR FRIENDS ... FROM YOUR FAMILY ... AND FROM YOUR FAITH.

AND I WOULD HOPE YOU WOULD HAVE SOME OF EACH.

AND FROM ALL THAT ACCUMULATED KNOWLEDGE AND EXPERIENCE, YOU MUST SQUEEZE OUT EVERY OUNCE OF GOOD JUDGMENT, OF DEEP FELLOW FEELING, AND OF LOVE OF COUNTRY. I THINK THAT'S WHAT EVERY PRESIDENT WANTS -- BUT I KNOW THAT'S WHAT EVERY TAXPAYER WANTS. AND I WAS ONE OF THOSE BEFORE I WAS SURGEON GENERAL.

SO I DECIDED NOT TO CHANGE C. EVERETT KOOP. RATHER, I DECIDED I WOULD TRY TO BECOME THE BEST C. EVERETT KOOP THAT I COULD POSSIBLY BE.

HISTORY WILL DECIDE WHETHER OR NOT I SUCCEEDED. NEVERTHELESS, FOR MYSELF ... I BELIEVE I MADE THE RIGHT CHOICE.

BUT IT DIDN'T MAKE MY ASSIGNMENT ANY EASIER. INSTEAD, I WAS FORCED TO DISCOVER THINGS ABOUT MYSELF AND ABOUT MY COUNTRY THAT I DID NOT FULLY UNDERSTAND UNTIL I EMBARKED ON THIS NEW EXPERIENCE AS SURGEON GENERAL.

I WILL CONFESS TO YOU THAT IT'S HARD TO AVOID THE HEADY EXCITEMENT THAT COMES WITH THE CALL FROM YOUR PRESIDENT ... THE INQUIRIES FROM THE PRESS ... AND THE LATE-NIGHT CONVERSATIONS WITH POWERFUL SENATORS AND CONGRESSMEN.

WHILE ALL THIS IS HAPPENING, YOU'RE ALSO TALKING THINGS OVER WITH YOUR FAMILY, SINCERELY TRYING TO BE FAIR TO THEM AS WELL -- AND NOT DOING A VERY GOOD JOB OF IT.

YET, DESPITE ALL THIS DEBATE AND RUMINATION, I DID NOT TRULY UNDERSTAND WHAT MY JOB AND MY LIFE WERE REALLY GOING TO BE LIKE. I KNOW THAT NOW. I DID NOT KNOW IT THEN. AND IN ANY CASE, I DIDN'T DARE ASK.

THE FIRST REAL INKLING I HAD THAT LIFE WAS GOING TO BE VERY
DIFFERENT CAME AFTER I HAD BEEN IN ^{SG}~~GOVERNMENT~~ LESS THAN 6 MONTHS.

BY THEN IT WAS APRIL 1982, AND A LITTLE BOY -- TO BE KNOWN
FOREVER IN THE HISTORY BOOKS AS "BABY DOE" -- WAS BORN IN
BLOOMINGTON, INDIANA.

"BABY DOE" WAS BORN WITH MULTIPLE CONGENITAL DEFECTS,
INCLUDING AN ESOPHAGEAL ATRESIA AND DOWN SYNDROME. MANY OF YOU
I'M SURE REMEMBER THE CASE.

AN ATTENDING SURGEON TOLD "BABY DOE'S" PARENTS THAT THEIR SON HAD ABOUT A 50-50 CHANCE OF SURVIVING AN OPERATION TO CLEAR UP THE OBSTRUCTION. AND AN ATTENDING PEDIATRICIAN TOLD THEM THAT, EVEN IF "BABY DOE" DID SURVIVE, HE WOULD PROBABLY GROW UP SEVERELY RETARDED AND ENDURE A POOR "QUALITY OF LIFE."

BOTH THOSE PHYSICIANS WERE WRONG.

NEVERTHELESS, ON THE BASIS OF SUCH INFORMATION, THE PARENTS OF "BABY DOE" ASKED THAT THEIR SON BE GIVEN NO FURTHER MEDICAL ASSISTANCE OR NOURISHMENT OF ANY KIND.

IN EFFECT, THEY SENTENCED THEIR SON TO DEATH.

THE GOVERNMENT WAS NOT IMMEDIATELY INVOLVED. THERE WAS, AS THEY SAY IN THE LEGAL TRADE, "NO COMPELLING FEDERAL INTEREST."

BUT A CHALLENGE WAS NEVERTHELESS MOUNTED AGAINST THE PARENTS INSTRUCTIONS. SOME MEMBERS OF THE HOSPITAL STAFF WENT TO COURT ON THEIR OWN, ACTING ON "BABY DOE'S" BEHALF. BUT IT DIDN'T HELP.

ON APRIL 15, ONE WEEK AFTER HIS BIRTH, "BABY DOE" DIED. AND ALL THE COURT ARGUMENTS BECAME MOOT.

AS I SAY, I WAS NOT A PARTY TO ANY OF THOSE PROCEEDINGS, BUT I WAS STUNNED BY WHAT HAD HAPPENED. AFTER ALL, I HAD JUST COMPLETED 35 YEARS AS A PEDIATRIC SURGEON. I HAD DEVOTED MY PROFESSIONAL LIFE TO DOING SUCH THINGS AS CORRECTING ESOPHAGEAL ATRESIA ON HUNDREDS OF INFANTS.

AND I MIGHT ADD THAT MY SUCCESS RATE WAS FAR HIGHER THAN 50-50: IN FACT, I HAD NOT LOST A FULL-TERM BABY IN MY LAST 8 YEARS IN SURGERY AND I HAD AN 88 PERCENT SURVIVAL RATE FOR PREMATURE BABIES.

MY COLLEAGUES

AND MANY OF ~~YOU~~ WERE DOING JUST AS WELL.

YET, AS THE NATION'S "SURGEON GENERAL," NO LESS, I COULD NOT DO FOR "BABY DOE" WHAT I HAD DONE FOR HUNDREDS OF OTHER BABIES WITH THE SAME CONDITION. IT WAS VERY FRUSTRATING.

ALSO, I HAD NEVER DARED TO PREDICT THE "QUALITY OF LIFE" FOR AN INFANT WITH DOWN SYNDROME. CERTAINLY ONE OF OUR LIMITATIONS IS THE ABILITY TO PREDICT THE FUTURE "QUALITY OF LIFE" FOR HANDICAPPED CHILDREN.

MY FIRST INSTINCT WAS TO SPEAK OUT LOUD AND CLEAR ON BEHALF OF "BABY DOE." THIS WAS PRECISELY THE KIND OF FIGHT I WAS USED TO AND I WAS READY FOR.

BUT I ALSO REALIZED THAT I WAS NOT ONLY "BABY DOE'S" SURGEON GENERAL ... I WAS ALSO SURGEON GENERAL FOR HIS PARENTS ... AND, LIKE IT OR NOT, I WAS SURGEON GENERAL FOR THOSE TWO PHYSICIANS AS WELL.

"BABY DOE" NEEDED HELP ... BUT SO DID HIS PARENTS. LIKE MANY OTHER PARENTS, THEY MAY HAVE SIMPLY LACKED THE RESOURCES -- BE THEY MATERIAL, SOCIAL, OR ECONOMIC ... OR EMOTIONAL, MORAL, OR PSYCHOLOGICAL -- TO CARE FOR A DISABLED CHILD IN THEIR OWN FAMILY. I DIDN'T KNOW ... AND I HAD NO RIGHT TO JUDGE.

YOU CAN'T URGE PARENTS TO FIGHT FOR THE LIVES OF THEIR
DISABLED OR HANDICAPPED CHILDREN ... AND THEN JUST WALK AWAY WHEN
THE FIGHT IS WON. I HAD LEARNED THAT LESSON MANY TIMES OVER ^{RIGHT}
 HERE IN THIS HOSPITAL
 BUT SUDDENLY, IT HAD A GREAT DEAL MORE
MEANING FOR ME.

AS FOR THE ATTENDING PHYSICIANS, I DID NOT AGREE WITH THEM,
BUT I KNEW THERE WERE MANY IN THE PROFESSION WHO DID AND THAT,
SOMEHOW, I WOULD HAVE TO COUNSEL WITH THEM AS WELL ... THAT IS, IF
I REALLY WANTED TO PREVENT THE DEATHS OF ANY MORE "BABY DOES."
AND I DID.

THERE WERE TWO SETS OF REGULATIONS PROMULGATED BY HHS BUT I HAD NOTHING TO DO WITH WRITING THEM. BUT I TOOK ALL THE FLACK -- I WAS THE LIGHTNING ROD.

I CONVINCED MARGARET HECKLER THEN SECRETARY OF HHS THAT IF I WERE TO TAKE ALL THE CRITICISM I SHOULD AT LEAST WRITE THE THIRD SET OF REGULATIONS. SHE AGREED. *SOME OF YOU MAY REMEMBER I SPENT A DAY HERE TALKING IT OUT WITH YOU.*

ALTHOUGH WHAT I WROTE WAS EVENTUALLY STRUCK DOWN IN COURT, THE REGULATIONS I WROTE WOULD HAVE WORKED.

I BROUGHT TOGETHER HANDICAPPED ADVOCATES, PEDIATRICIANS, PRO-LIFE PEOPLE AND AFTER THEY OVERCAME THEIR INITIAL HOSTILITY THEY PUT TOGETHER A DOCUMENT ON THE RIGHTS OF A HANDICAPPED NEONATE -- ONE OF THE BEST MANIFESTOS OF THIS CENTURY.

MADELINE WILL OF THE DEPARTMENT OF EDUCATION WAS OF GREAT HELP IN WRITING THE REGULATIONS -- I USED POSITIVE AND NOT NEGATIVE STATEMENTS -- ^{BUT} ~~AND~~ I USED THEIR LANGUAGE. THAT'S WHY IT WOULD HAVE WORKED.

I WON'T BORE YOU WITH ALL THE DETAILS. INSTEAD, LET ME JUST SAY THAT WE NOW HAVE STILL ANOTHER LAW ON THE BOOKS THAT PROTECTS THE LIVES OF FUTURE "BABY DOES," WHILE STILL RECOGNIZING THE ROLE OF PARENTS AND THE ROLE OF ATTENDING PHYSICIANS. THE LAW IS NOT PERFECT. BUT IT WORKS.

IT ALL SOUNDS RATHER SMOOTH, BUT IT WASN'T THAT WAY AT ALL. I WAS QUITE RUDELY SURPRISED BY THE ATTITUDE OF MY MANY FRIENDS IN THE PRO-LIFE MOVEMENT. TO THEM, I HAD BECOME A TURNCOAT. THEY SAID I WAS TEMPORIZING AND EVEN ABANDONING THE ABSOLUTIST POSITIONS I HAD TAKEN -- FOR MANY YEARS. AND IT'S TRUE ... I HAD.

BUT THEIR CRITICISMS WERE UNFAIR. MY PERSONAL IDEOLOGY HAD NOT CHANGED ONE IOTA. I DON'T BELIEVED IT IS ESSENTIALLY ~~UN~~CHANGED TODAY. BUT MY PUBLIC POSITION DID REQUIRE SOME ADDITIONAL THOUGHT.

I LEARNED THAT IN PUBLIC HEALTH MATTERS, IDEOLOGY CAN BE HELPFUL ... BUT IDEOLOGY IS NOT ENOUGH.

AS A PUBLIC PHYSICIAN IN THE SERVICE OF MY COUNTRY, I COULD NOT PICK AND CHOOSE HOW I WOULD PRACTICE AND WHOM I WOULD SERVE.

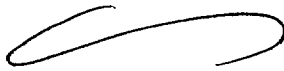
I HAD A RESPONSIBILITY TO BE TRUE TO MY OWN BELIEFS AND IDEALS ... THERE'S NO QUESTION ABOUT THAT ... BUT NEVER AT THE EXPENSE OF THE PEOPLE WHOM I HAD TAKEN A SOLEMN OATH TO SERVE.

FOLLOWING THE YEAR-LONG "BABY DOE" DIALOGUE, I CONVENED A SERIES OF "SURGEON GENERAL'S WORKSHOPS" THAT FOCUSED ON THE NEEDS OF THE HANDICAPPED CHILD AND HIS OR HER FAMILY. : WHAT EVOLVED WAS A CONCEPT OF "FAMILY-CENTERED, COMMUNITY-BASED, COMPREHENSIVE CARE FOR CHILDREN WITH SPECIAL NEEDS."

IT'S NEW.

AND IT WORKS.

AND IT'S BEING ADOPTED MORE AND MORE ALL ACROSS THE COUNTRY.



MY SCRAPBOOK IS FILLED WITH PRAISE FOR WHAT I'VE MANAGED TO DO IN REGARD TO SMOKING AND WITH AIDS. AND I FEEL GOOD ABOUT THAT. HOWEVER, I'D HAVE TO SAY THAT I COUNT AS ONE OF MY MAJOR ACHIEVEMENTS OF THESE PAST 8 YEARS THIS EVOLUTION OF A MORE WIDESPREAD, MORE EFFECTIVE, AND MORE COMPASSIONATE APPROACH TO CHILDREN WHO ARE BORN WITH A NON-FATAL HANDICAP.

AS I SAY, THE "BABY DOE" ISSUE AROSE EARLY IN MY FIRST TERM AS SURGEON GENERAL. BUT IT WAS NOT THE ONLY ISSUE PERCOLATING AT THE TIME IN THE HIGHER REACHES OF GOVERNMENT HEALTH POLICY. THERE WERE SEVERAL OTHERS: GERMINATING AT THE HIGHEST LEVELS OF PUBLIC HEALTH POLICY:

* THERE WAS SMOKING, OF COURSE, I'VE MENTIONED THAT.

* THERE WAS ALSO FAMILY VIOLENCE, AND I'M ESPECIALLY PLEASED WITH THE SUCCESS WE'VE HAD IN PUTTING THIS HIGH UP ON THE PUBLIC HEALTH AGENDA OF THIS COUNTRY FOR THE FIRST TIME.

* THERE WAS ALSO THE HEALTH OF THE AGED AND THE NEED FOR ALL OF US IN MEDICINE TO FOCUS UPON THE REALITIES OF THE HEALTH OF AGING PEOPLE ... AND NOT UPON THE MYTHOLOGIES AND MISCONCEPTIONS REGARDING THE ILLNESSES OF AGING PEOPLE.

* THERE WAS THE ISSUE OF INFANT MORTALITY, IN PARTICULAR THE ALARMINGLY HIGH RATES THAT PERSIST AMONG THE BLACK COMMUNITY. FOR REASONS THAT STILL BAFFLE MOST OF US, THE BLACK RATE REMAINS AT ABOUT TWICE THE WHITE RATE ... AND WE'VE HAD VERY LITTLE LUCK REDUCING THIS FACTOR OF 2.

BUT ONE ISSUE WAS TO CONSUME MOST OF MY WAKING HOURS FOR THE LAST THREE YEARS OF MY SECOND TERM IN OFFICE.

THAT ISSUE, OF COURSE, IS AIDS.

THE SUBJECT OF AIDS HAS BEEN COVERED SO EXTENSIVELY AND IN SUCH DEPTH THAT I'LL JUST OFFER A COUPLE OF PERSONAL PERCEPTIONS FOR YOU THIS AFTERNOON.

FIRST OF ALL, I THINK IT'S TIME TO LOOK AT THE HISTORY OF THIS EPIDEMIC THROUGH A LENS CLEARED OF BIAS AND POLITICS. FOR EXAMPLE, MANY CRITICS HAVE TAKEN THE GOVERNMENT TO TASK FOR TAKING "SO MUCH TIME" IN THE EARLY DAYS OF THE EPIDEMIC.

SUCH CRITICS CONVENIENTLY OVERLOOK THE NATURE OF THE EPIDEMIC IN THE EARLY DAYS OF 1981 AND 1982. WE WERE SEEING MEN COME INTO CLINICS AND HOSPITALS PRESENTING THE SYMPTOMS OF THE VERY RARE PNEUMOCYSTIS CARINII PNEUMONIA ... OR EVIDENCE OF CYTOMEGALOVIRUS AND CANDIDA INFECTIONS ... PLUS THE HIGHLY UNCOMMON KAPOSI'S SARCOMA ... ALSO, HERPES SIMPLEX ... CRYPTOCOCCAL MENINGITIS ... TOXOPLASMOSIS ... DISSEMINATED MYCOBACTERIUM AVIUM-INTRACELLULARE, AND SO ON.

MAYBE YOU'VE HEARD OF THESE DISEASES. I'M SURE YOU'VE SEEN VERY FEW OF THEM. AND YOU'RE NOT ALONE.

IN 1981 AND 1982 THE UNITED STATES HAD EVEN FEWER TRAINED CLINICIANS AND RESEARCHERS THAN NOW FAMILIAR WITH THESE RARE DISEASES THAT WERE CROPPING UP IN LOS ANGELES, SAN FRANCISCO, AND NEW YORK. AND IN ANY CASE, WE HAD NO CURES FOR THEM.

ALSO, THE PATIENTS WITH THOSE CONDITIONS WERE IN EVERY CASE HOMOSEXUAL MEN. HOWEVER, BY THE 1970s AND EARLY '80s, A GREAT MANY HOMOSEXUAL AND BISEXUAL MEN HAD CHOSEN TO PATRONIZE PHYSICIANS AND CLINICS WHO WERE MORE UNDERSTANDING OF THE SO-CALLED "GAY LIFESTYLE."

IN MAKING THAT CHOICE, THESE MEN EFFECTIVELY PLACED THEMSELVES OUTSIDE MAINSTREAM CLINICAL MEDICINE AND, THEREFORE, THEY WERE MORE DIFFICULT TO KNOW ... TO REACH ... AND TO HELP.

THIS CHOICE WAS PART OF WHAT WAS KNOWN AT THE TIME AS THE "GAY REVOLUTION," WHEN HOMOSEXUAL AND BISEXUAL MEN WERE "COMING OUT OF THE CLOSET" AND ASSERTING THEIR CIVIL RIGHTS.

UNFORTUNATELY, MOST "GAY ACTIVISTS" COMBINED THE OTHERWISE SEPARATE ISSUES OF HEALTH AND POLITICS. THEY THEN PLACED THIS SINGLE PACKAGE OF GRIEVANCES BEFORE THE GENERAL PUBLIC FOR REDRESS.

BUT THE AMERICAN PEOPLE HAD NEITHER THE SKILL NOR THE PATIENCE TO SORT OUT THESE ISSUES. HENCE, THIS STRATEGY OF THE "GAY COMMUNITY" GENERATED MORE PUBLIC CONFUSION AND ANGER THAN IT DID PUBLIC UNDERSTANDING AND SYMPATHY.

AS A RESULT, OUR FIRST PUBLIC HEALTH PRIORITY -- THAT IS, TO STOP FURTHER TRANSMISSION OF THE AIDS VIRUS -- BECAME HOPELESSLY AND NEEDLESSLY MIRED IN THE SEXUAL POLITICS OF THE EARLY 1980s.

WE LOST A GREAT DEAL OF PRECIOUS TIME BECAUSE OF THIS ... AND I SUSPECT WE LOST SOME LIVES AS WELL.

YET, DESPITE THE CONFUSION AND FRUSTRATION, THE ANGER AND THE IGNORANCE, THE TERROR AND THE DEATH, THE GOVERNMENT DID PRESS FORWARD IN BIOMEDICAL SCIENCE AND RESEARCH. AND, BY THE FALL OF 1985, A RELIABLE BLOOD TEST WAS DISCOVERED AND MADE GENERALLY AVAILABLE.

IN MY BOOK, ANYWAY, THAT IS ONE OF THE RESEARCH MIRACLES OF THIS CENTURY BECAUSE, AT THAT POINT, WE WERE ABLE TO TEST THE HUMAN BLOOD SUPPLY FOR THE PRESENCE OF A LETHAL VIRUS ... ABOUT WHICH WE OTHERWISE KNEW NEXT TO NOTHING.

SO I THINK THE HISTORICAL RECORD ACTUALLY SHOWS THAT --
DESPITE THE COMPOUNDING OF MEDICAL MYSTERIES THAT WAS OCCURRING
AND DESPITE THE POLITICAL CONFUSION THAT WAS GENERATED --- THE
GOVERNMENT PERSEVERED AND MADE ASTONISHING PROGRESS.

I'D LOVE TO TAKE CREDIT FOR THAT EARLY LEADERSHIP BY THE U.S.
PUBLIC HEALTH SERVICE. BUT I CAN'T. I WAS NOT INVOLVED AT ALL IN
THE EARLY DAYS OF THE AIDS EPIDEMIC. AND THE REASON IS QUITE
MUNDANE ... HARDLY THE STUFF OF SCANDAL.

IN CASE YOU DON'T KNOW IT BY NOW, THE POSITION OF SURGEON
GENERAL IS SUPPORTED BY A HALF-DOZEN STAFF AND ENOUGH MONEY TO BUY
PAPER CLIPS AND NAME-TAGS. AND THAT'S ABOUT IT.

THE AIDS RESEARCH, HOWEVER, HAS BEEN CARRIED OUT AT THE NATIONAL INSTITUTES OF HEALTH, THE CENTERS FOR DISEASE CONTROL, AND THE FOOD AND DRUG ADMINISTRATION.

THE SURGEON GENERAL RUNS NONE OF THESE ORGANIZATIONS.

THE BASIC EPIDEMIOLOGY AND CASE REPORTING ARE TASKS PERFORMED BY STATE AND LOCAL PUBLIC HEALTH AGENCIES. AND THEY'VE BEEN EXTRAORDINARY THROUGHOUT THE AIDS EPIDEMIC.

BUT I DON'T RUN THEM EITHER.

SO THERE WAS LITTLE REASON TO GET THE SURGEON GENERAL INVOLVED IN THE EARLY YEARS OF THE EPIDEMIC.

BUT THEN -- ALONG ABOUT 1985 AND 1986 -- IT BECAME CLEAR THAT THE PUBLIC WAS RECEIVING A GREAT MANY MIXED, CONFUSING, AND PLAIN WRONG MESSAGES ABOUT THE DISEASE OF AIDS.

THE TIME HAD COME FOR THE GOVERNMENT TO TROT OUT SOMEBODY WHO HAD THE CREDIBILITY TO TELL THE AMERICAN PEOPLE WHAT WE KNEW TO BE TRUE ABOUT THE AIDS EPIDEMIC ... WHAT WE KNEW TO BE FALSE ABOUT THE EPIDEMIC ... AND WHAT WE STILL DIDN'T KNOW AT ALL ABOUT THE AIDS EPIDEMIC.

IN FEBRUARY 1986, PRESIDENT REAGAN -- LIKE MANY PRESIDENTS BEFORE HIM -- TURNED FOR HELP TO HIS SURGEON GENERAL. THE PRESIDENT DIRECTED THAT I PREPARE A REPORT TO THE AMERICAN PEOPLE ON AIDS.

THE REPORT HAD TO GIVE THE FACTS ABOUT AIDS AND TELL PEOPLE HOW TO PROTECT THEMSELVES FROM GETTING IT.

THE REPORT ALSO HAD TO EXPOSE THE FALSE MYTHOLOGIES THAT HAD BEGUN TO APPEAR CONCERNING AIDS ... MYTHOLOGIES FRANKLY PERPETUATED BY MEAN-SPIRITED PEOPLE WITH A MACABRE VIEW OF THE HUMAN CONDITION.

I MENTIONED THAT THE HOMOSEXUAL COMMUNITY HAD CARELESSLY POLITICIZED THE AIDS ISSUE IN THE BEGINNING. IN ALL FAIRNESS, I MUST ADD THAT THE ISSUE WAS FURTHER POLITICIZED BY EXTREME CONSERVATIVES, PEOPLE FOR WHOM IDEOLOGY WAS EVERYTHING.

CONSERVATIVES -- MY LONG-TIME FRIENDS AND SUPPORTERS -- CHEERED THE PRESIDENT'S DECISION. MANY OF THEM PREDICTED THAT I WOULD PRODUCE THE "RIGHT" KIND OF REPORT, APPROPRIATELY LAUNDERED TO THEIR LIKING.

THEY WERE MISTAKEN.

AFTER 8 MONTHS OF LISTENING TO ALL SHADES OF OPINION -- LEFT, RIGHT, AND CENTER -- FROM A BROAD CROSS-SECTION OF OUR SOCIETY, I RELEASED MY REPORT DIRECTLY TO THE AMERICAN PEOPLE AT AN OCTOBER 1986 PRESS CONFERENCE.

I MUST TELL YOU THAT IT WAS A DIFFICULT TIME FOR ME. I KNEW, FOR EXAMPLE, THAT MANY OF MY FRIENDS IN CONSERVATIVE PROTESTANT SECTS AND IN THE CATHOLIC CHURCH -- FRIENDS AND ALLIES IN MANY PAST BATTLES AGAINST ABORTION -- I KNEW THAT THEY WEREN'T GOING TO LIKE MY REPORT.

THEY VIEW ANAL INTERCOURSE -- OR SODOMY -- AS A VIOLATION OF LAWS BOTH SPIRITUAL AND TEMPORAL. WELL ... SO DO I.

BUT THAT WAS HARDLY THE COMPELLING PUBLIC HEALTH ISSUE IN 1986. THE ISSUE THEN WAS THAT ANAL INTERCOURSE WAS THE PRIME METHOD OF TRANSMISSION OF THE AIDS VIRUS. WE HAD TO RECOGNIZE THAT THAT WAS THE CASE ... AND THEN WE HAD TO CONVINCE MEN TO STOP DOING IT.

OF COURSE, THAT MEANT WE HAD TO ESTABLISH A WORKING RELATIONSHIP OF TRUST WITH PEOPLE WHOSE LIFESTYLES WE DIDN'T ESPECIALLY LIKE. BUT -- AS I'VE SAID OVER AND OVER AGAIN -- WE'RE IN A FIGHT AGAINST A DEADLY DISEASE, NOT AGAINST THE PEOPLE WHO HAVE IT.

I BELIEVE I WAS RIGHT. I THINK MY VERY CONSERVATIVE FRIENDS SECRETLY KNEW I WAS RIGHT. AND NATURALLY THEY FOUND THAT TO BE VERY IRRITATING.

BUT WHAT IF HOMOSEXUAL AND BISEXUAL MEN DID NOT STOP THOSE HIGH-RISK SEXUAL PRACTICES? THEN WHAT?

THAT LED ME TO A SECOND CONCLUSION THAT FURTHER IRRITATED MANY OF MY OLD FRIENDS AND ALLIES.

IF THOSE MEN PERSISTED IN ENGAGING IN ANAL INTERCOURSE, ESPECIALLY WITH ANONYMOUS OR CASUAL SEX PARTNERS, THEN THEY HAD TO PROTECT THEMSELVES -- AND THEIR PARTNERS -- WITH SOME KIND OF IMPERMEABLE BARRIER TO PREVENT TRANSMISSION OF THE VIRUS.

SUCH BARRIERS ARE KNOWN AS "CONDOMS." AND I'M AFRAID THAT I MADE CONDOMS THE "C-WORD" OF 1986 AND '87.

BUT LET ME BE CLEAR ABOUT THIS. NEVER ONCE DID I CONSIDER CONDOMS TO BE SOCIETY'S FIRST LINE OF DEFENSE AGAINST AIDS -- AND I STILL DON'T.

I ALWAYS TELL MY AUDIENCES -- AND I'LL TELL YOU TODAY -- THAT ABSTINENCE IS YOUR BEST DEFENSE AGAINST AIDS OR ANY OTHER SEXUALLY TRANSMITTED DISEASE FOR THAT MATTER.

HOWEVER, FAILING THAT, YOUR NEXT BEST DEFENSE IS A MUTUALLY FAITHFUL, MONOGAMOUS RELATIONSHIP.

AND FAILING THAT, THEN YOU OR YOUR PARTNER HAD BETTER USE A CONDOM.

AND THAT'S BEEN MY BASIC MESSAGE FOR THE PAST ^{FOUR} THREE YEARS.

I CAN TELL YOU THAT, BACK IN 1981, I HAD NO IDEA I'D EVER BE CALLED UPON TO DELIVER SUCH A MESSAGE.

BUT IN 1986 -- AND EVER SINCE THEN -- I DON'T BELIEVE I'VE HAD THE LUXURY TO CHOOSE A MORE COMFORTABLE OR MORE GENTEEL MESSAGE FOR THE AMERICAN PEOPLE. THE TRUTH IS WHAT THEY NEEDED, SO THAT THEY COULD SAVE THEIR OWN LIVES AND THE LIVES OF PEOPLE THEY LOVED.

ANYTHING LESS THAN THE TRUTH, THEREFORE, WOULD BE LIFE-THREATENING. SO I DON'T THINK I HAD A CHOICE IN THIS MATTER.

I WISH THE ANGER ABOUT CONDOMS COULD HAVE BEEN THE END OF THE MATTER. BUT IT WASN'T.

FROM THE DATA GIVEN TO ME BY THE CENTERS FOR DISEASE CONTROL, I WAS STARTLED TO LEARN THAT THE MEDIAN AGE OF AIDS VICTIMS WAS QUITE LOW. THEY WERE MOSTLY YOUNG MEN IN THEIR EARLY 20s.

C.D.C. ALSO LEARNED BY THEN THAT AN INFECTED INDIVIDUAL COULD CARRY THE AIDS VIRUS WITHIN HIS OR HER BLOODSTREAM FOR AS LONG AS 7 YEARS -- AND MAYBE EVEN LONGER -- BEFORE SHOWING SIGNS OF AN OPPORTUNISTIC INFECTION ... KAPOSI'S SARCOMA, PNEUMOCYSTIC CARINII PNEUMONIA, CYTOMEGALOVIRUS, AND SO ON.

WHAT DID THAT MEAN? I'LL TELL YOU WHAT THAT MEANT. IT MEANT THAT MANY THOUSANDS OF THOSE YOUNG MEN WHO WERE REPORTED AS PRESENTING AN AIDS-RELATED DISEASE HAD PROBABLY BECOME INFECTED WITH THE AIDS VIRUS WHEN THEY WERE STILL IN THEIR TEENS.

AND THAT MEANT THAT THE WHOLE AIDS ISSUE -- COMPLETE WITH EDUCATION PRECEDING THE ONSET OF SEXUAL EXPERIMENTATION AND -- YES -- AND DISCUSSIONS ABOUT CONDOMS -- ALL THAT WOULD SOMEHOW HAVE TO BE INTRODUCED INTO OUR SECONDARY SCHOOLS ... AND SOME PREPARATION WAS NO DOUBT NECESSARY IN OUR ELEMENTARY SCHOOLS AS WELL.

PLEASE REMEMBER THAT WE DID NOT HAVE THEN -- AND WE STILL DO NOT HAVE TODAY -- AN EFFECTIVE AND GENERALLY AVAILABLE ANTI-AIDS VACCINE. SUCH A VACCINE IS STILL YEARS AWAY. THEREFORE, OUR SINGLE WEAPON AGAINST AIDS -- IN 1986 AND 1987 AND FOR MANY MORE YEARS TO COME -- WAS AND WILL CONTINUE TO BE ... EDUCATION ... EDUCATION ... AND MORE EDUCATION.

THE T.V. LIGHTS HAD BARELY BEEN SWITCHED OFF AT MY OCTOBER 1986 PRESS CONFERENCE, WHEN I WAS IMMEDIATELY AND WITLESSLY ACCUSED OF ADVOCATING THE TEACHING OF SODOMY TO THIRD-GRADERS.

SHORTLY THEREAFTER IT WAS REPORTED THAT I HAD PASSED OUT
CONDOMS TO 8-YEAR-OLDS.

AND MUCH MORE. IT WAS A VERY PAINFUL TIME, PERSONALLY.

BUT THOSE PERSONAL ATTACKS WERE NOT MY CHIEF WORRY. I KNEW
THEY WOULD HAVE NO LASTING EFFECT ON ME. SUCH ATTACKS NEVER HAVE.

RATHER, I WAS ANNOYED AT THOSE FEW CRITICS WHO -- BY ATTACKING
ME -- WERE HOPING TO COMPROMISE THE GOVERNMENT'S ABILITY TO DELIVER
THE FACTS ABOUT AIDS TO THE AMERICAN PEOPLE.

THEY HATED THE MESSAGE ... SO THEY DECIDED TO DISCREDIT THE MESSENGER.

THOSE CRITICS WERE PLAYING WITH FIRE. AND -- WORSE YET -- I THINK THEY KNEW IT.

SO MY COURSE OF ACTION BECAME CLEARER EVERY DAY. I WOULD HAVE TO CONDUCT MYSELF IN THE SAME MANNER AS MY PREDECESSORS HAD CONDUCTED THEMSELVES AS SURGEONS GENERAL. AND THEY HAD DONE SUCH A GOOD JOB THAT THE OFFICE I HELD WAS AMONG THE MOST CREDIBLE AND RELIABLE IN THE GOVERNMENT ... THE ENVY OF PRESIDENTS, I MIGHT ADD.

NOW IT WAS MY JOB TO MAINTAIN THAT TRADITION, THAT'S ALL THERE WAS TO IT. DESPITE THE COMPLEXITY AND THE EMOTION IN THE AIDS ISSUE, MY TASK WAS CLEAR: I HAD TO DO WHATEVER WAS NECESSARY TO PROTECT THE CREDIBILITY OF THIS OFFICE FOR MYSELF ... MY SUCCESSORS ... AND MY COUNTRY.

AND I HOPE AND PRAY THAT THAT'S WHAT I HAVE DONE.

WHEN MY SUCCESSOR ARRIVES -- LATER THIS YEAR -- I HOPE THAT HE OR SHE WILL FIND THE OFFICE AS STRONG AS IT WAS WHEN I ARRIVED SOME 8 YEARS AGO. OR EVEN STRONGER.

Looking back on my last years in government, some might think that I was a glutton for punishment. I had another encounter with the public and the conservative/liberal split in the early months of 1989.

Otis Bowen, then Secretary of Health and Human Services, had fired a member of his department who happened to be very strongly pro-life.

In the ensuing concern over that dismissal, the President became embroiled in a situation where he had to mollify pro-life leaders. In the process, he was misled by some of his staffers into believing that if the Surgeon General were to write a report on the health effects of abortion on women, it would be so devastating, that the Supreme Court decision Roe v. Wade could be reversed. ;

The President, therefore, told the pro lifers that he was asking the Surgeon General to write a report on the health effects of abortion on women.

I felt from the beginning that the President was on the wrong track. The whole pro-life movement had been built around the effects of abortion on the fetus, not the health effects of the abortion on women who were having abortions.

I SAID THAT AS
THOUGH I HAD A CITE
DIDNT I."

I accepted the assignment, ~~as~~ WELL, I
proceeded as I had with preparing
the report on AIDS. I called in
representatives of 27 groups of
people who had an interest in
abortion and the possible health
effects on women. After spending
many months in investigation, and
after reading the literature on the
subject, I came to a conclusion.

Anecdotal evidence on the deleterious effects of abortion on women was abundant. Indeed, in my former incarnation I had counseled women who were in the midst of deep depressions over guilt. But I also have encountered women who felt that the health effects of abortion on them was positive because it either saved a marriage, enabled the individual to finish an education, or kept her from being thrown out on the street by an irate father.

All of the literature that my staff and I read seemed to carry the bias, socially or sociologically - *ABORT*
ABORTION
of the author. I did not rely on myself in this regard, but used statisticians who were as free from ideology on the subject of abortion as it was possible to find.

My conclusion was that it was not possible, either scientifically or statistically, to write a report - that would stand up to scrutiny in the scientific community - one way or the other.

Therefore, I wrote the President stating I could not write him a report, ^{AND GAVE} the reasons why.

I ~~and~~ made it clear that there was not sufficient statistical and scientific evidence to produce the kind of a report that he had been led to believe I could make.

I did not say that there was no evidence of deleterious effects of abortion on women, however, one United Press misinterpretation of what I had said was published and picked up by all the major networks, and overnight I was accused of having changed a position I have held on abortion for the previous 20 years.

The worst thing I could have done for the pro-life movement would have been to write a report that could have been torn apart scientifically.

This time the attacks were rather personal. I admit I have been stung by some of these personal attacks. I have been outraged to see my words distorted, my beliefs doubted and my integrity questioned.

My position on ~~_____~~ ^{THESE}
~~_____~~ subjects realigned those who
had supported me and those who
had opposed me. Once praised by
conservatives and condemned by
liberals, I suddenly found myself
attacked by former friends and
praised by former foes.

Many of the conservatives who now oppose me were against me merely because liberals spoke in my favor. You have all heard about knee-jerk liberals. Let me tell you, conservative knees jerk just as readily.

AS I INDICATED AT THE BEGINNING OF THESE REMARKS, I DID NOT LOCK AWAY MY PERSONAL BELIEFS AND PERSONAL ETHICS BEFORE COMING TO WASHINGTON. I DREW UPON THEM CONTINUOUSLY TO GIVE ME MY DIRECTION AND MY STRENGTH.

THE RESULTS WERE NOT ALWAYS PREDICTABLE. AND SOMETIMES I WAS EVERY BIT AS SURPRISED AS THE NEXT PERSON BY THE CONCLUSIONS I REACHED IN THE COURSE OF DOING MY JOB.

SO BE IT.

THE EXPERIENCE HAS BEEN A REVELATION TO ME ... AND YET, IT HAS BEEN A REVELATION OF AN OLD AND NOT A NEW TRUTH. I HAVE RE-DISCOVERED ... THE HARD WAY, I GUESS ... THIS SIMPLE TRUTH:

WHEN YOU'RE BEING TESTED, YOU HAVE TO KNOW YOURSELF ... AND YOU HAVE TO BE TRUE TO YOURSELF ... AND ALL THE IMPORTANT THINGS WILL FOLLOW.

THIS AFTERNOON, AT THIS GENEROUS CEREMONY, THAT SIMPLE TRUTH COMES HOME TO ME AGAIN. OVER THE PAST 8 YEARS, I LEARNED QUITE A BIT ABOUT WHO C. EVERETT KOOP REALLY IS ... AND I'VE TRIED TO BE THE VERY BEST C. EVERETT KOOP I COULD BE ... AND AN IMPORTANT THING HAS FOLLOWED: I'M STILL CREDIBLE. I'M STILL BELIEVED. I HOPE TO CONTINUE IN THE MONTHS AHEAD ON THIS BASIS, TO DELIVER MESSAGES TO THE AMERICAN PEOPLE.

TO EACH ONE OF YOU, LET ME SAY, "THANK YOU ... AND GOD BLESS YOU."

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